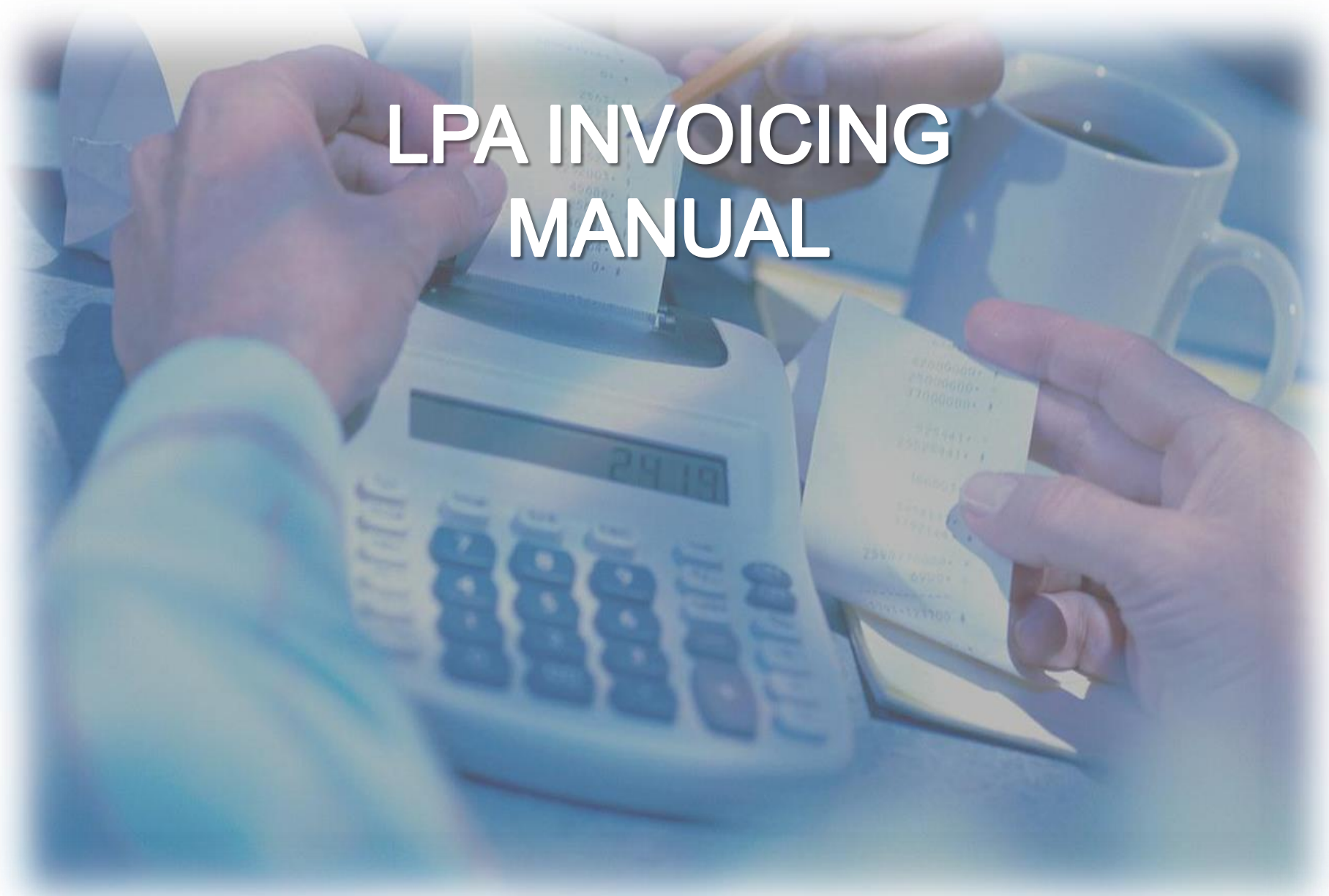


# LPA INVOICING MANUAL



## **A. INTRODUCTION**

### **PURPOSE OF THIS MANUAL**

## **B. PRELIMINARY ENGINEERING INVOICING PACKAGE**

- INVOICING INSTRUCTIONS
- EXAMPLES
- CHECKLIST

## **C. CONSTRUCTION ENGINEERING & INSPECTION INVOICING PACKAGE**

- INVOICING INSTRUCTIONS
- EXAMPLES
- CHECKLIST

## **D. FINAL INVOICING PACKAGE**

- INVOICING INSTRUCTIONS
- EXAMPLES
- CHECKLIST

# **A. INTRODUCTION**

## **PURPOSE OF THIS MANUAL**

The purpose of this manual is to assist all Local Public Agencies (LPA's) with the submittal of their invoicing package when requesting reimbursement on federally funded projects. All invoicing packages are required to be submitted in a timely manner to the oversight agency, the Mississippi Department of Transportation, for review and reimbursement of funds. This invoicing manual will provide the LPA with step by step instructions of the documentation required when requesting reimbursement on federally funded projects. Example invoicing packages are provided in this manual as a guide to assist the LPA when requesting reimbursement on contract specific projects.

## **B. PRELIMINARY ENGINEERING INVOICING PACKAGE**

# INSTRUCTIONS

- I. MDOT creates CSU-001 and e-mails it to the LPA/Consultant after NTP and executed Contract is received by MDOT;
- II. Consultant's project manager signs CSU-001 and forwards a complete copy of the Invoice Package to the LPA;
- III. LPA Reviews Invoice Package, if appropriate, Chief Administrative Official (CAO) signs CSU-001;
- IV. LPA pays the Consultant prior to MDOT reimbursement;
- V. LPA submits to MDOT "LPA Invoice Package" digitally at **[lpainvoice@mdot.ms.gov](mailto:lpainvoice@mdot.ms.gov)**;
- VI. MDOT reviews billing, if appropriate, processes invoice; and
- VII. MDOT CSU will sign and send copy of the invoice to the LPA.

# EXAMPLE – CSU-001

THIS CSU-001 FORM IS AN EXCEL SPREADSHEET WITH PERTINENT FINANCIAL CODING AND IS PROJECT SPECIFIC.

## PRELIMINARY ENGINEERING CSU-001 For LPA's

### MISSISSIPPI DEPARTMENT OF TRANSPORTATION PRELIMINARY ENGINEERING ESTIMATE - RECAP SHEET

P.O. No. 3941

Invoice Number:

Sheet No. 1 of

Vendor Number

Project No.

County

In Account With

Contract Number:

Est. No.

(Progress Estimate/Final)

Period

THRU

Document No.

	Line Item	OCA	User Code 1	Object	Project Number / Detail Code	User Code 2	Current Period	Previous Estimate	Total Allowed to Date
Total Participating Cost	1					1			
Total								0.00	
Total All Work Due								0.00	

\*\*\* Please populate any fields which are notated by the shaded boxes:

# EXAMPLE - INVOICE

THE INVOICE SHOULD BE FORMATTED IN ACCORDANCE WITH THE EXHIBIT 4 IN THE CONTRACT.

## EXHIBIT 4 SAMPLE INVOICE

LOCAL PUBLIC AGENCY  
ADDRESS  
CITY, STATE, ZIP CODE

DATE:

ATTENTION: ACCOUNTS PAYABLE

INVOICE NO. 0000

PERIOD \_\_\_\_ 20\_\_ THROUGH \_\_\_\_ 20\_\_

PROFESSIONAL SERVICES IN ACCORDANCE WITH

CONTRACT DATED \_\_\_\_ 20\_\_ AS RELATES TO

PROJECT NO. \_\_\_\_ IN \_\_\_\_ COUNTY, HIGHWAY \_\_\_\_.

CONSULTANT:

CUSTOMER NUMBER 0000000000 FILE NO. 000-000000

REPORT NUMBER: 0000 through 00000

	CURRENT PERIOD	PREVIOUS ESTIMATE	TOTAL ALLOWED TO DATE
DIRECT SALARIES	\$	\$	\$
* PAYROLL ADDITIVE (less FCCM)	\$	\$	\$
FIXED FEE (% complete X total fee less amounts previously paid - not to exceed 75%)	\$	\$	\$
PAYROLL ADDITIVE w/ FCCM only	\$	\$	\$
** DIRECT COSTS	\$	\$	\$
PROJECT TOTAL	\$	\$	\$
AMOUNT DUE THIS INVOICE:	\$	\$	\$

### NOTE:

1. \* PAYROLL ADDITIVES (INCLUDING ALL FRINGE BENEFITS & OVERHEAD-)
2. \*\* DIRECT COSTS (ATTACH SUPPORTING DATA)
3. THE CONSULTANT MAY USE ITS OWN INVOICE FORM SO LONG AS IT HAS BEEN APPROVED. PRIOR TO SUBMISSION BY THE CONSULTANT SAID FORM SHOULD, AT A MINIMUM, CONTAIN THE ABOVE INFORMATION

## SUPPORTING DATA

Project No. 00-0000-00-000-00  
County \_\_\_\_\_

Employee and Classification	Rate of Pay	Current Period Hours	Current Period Costs	Previous Period Costs	Costs To Date
DIRECT LABOR AND DIRECT COSTS					
John P. Public, Jr Engineer	0.00	0.0	0.00	0.00	0.00
John P. Public, Jr Designer	0.00	0.0	0.00	0.00	0.00
John P. Public, Jr Engineer	0.00	0.0	0.00	0.00	0.00
John P. Public, Jr Technician	0.00	0.0	0.00	0.00	0.00
Sub Total		0.0	0.00	0.00	0.00
Payroll Additives (minus FCCM)			0.00	0.00	0.00
Total Labor			0.00	0.00	0.00
Fixed Fee			0.00	0.00	0.00
Payroll additives w/ only FCCM (Direct Labor * FCCM)			0.00	0.00	0.00
Direct Costs			0.00	0.00	0.00
Project Total			0.00	0.00	0.00



# EXAMPLE – BILLING BACK-UP

THE LPA/CONSULTANT MUST PROVIDE TIMESHEETS AND/OR BILLING BACKUP TO SUPPORT THE HOURS BILLED ON THE PROJECT.

Project 99999.001		Invoice No. 102655		
<b>Billing Backup</b>		Tuesday, June 9, 2015		
		10:59:03 P.M.		
		ABC Engineering, Inc. Invoice No. 102655 Dated 6/9/2015		
Professional Personnel				
		<b>Hours</b>	<b>Rate</b>	<b>Amount</b>
<b>Clerical</b>				
Jones, Jessica	5/18/2015	8.00	27.00	216.00
Jones, Jessica	5/19/2015	6.00	27.00	162.00
Jones, Jessica	5/20/2015	2.00	27.00	54.00
<b>Engineer</b>				
Butler,Mark	5/4/2015	6.00	48.77	292.62
Butler,Mark	5/5/2015	5.00	48.77	243.85
Butler,Mark	5/6/2015	4.00	48.77	195.08
Butler,Mark	5/7/2015	4.00	48.77	195.08
James, Jordan	5/4/2015	4.00	49.50	198.00
James, Jordan	5/5/2015	2.00	49.50	99.00
James, Jordan	5/6/2015	8.00	49.50	396.00
James, Jordan	5/7/2015	8.00	49.50	396.00
<b>Project Manager</b>				
Mays, David	5/4/2015	1.00	65.23	65.23
Mays, David	5/7/2015	1.00	65.23	65.23
Total Labor		59.00		2578.09

## EXAMPLE – TIMESHEET

**THE LPA/CONSULTANT MUST PROVIDE TIMESHEETS AND/OR BILLING BACKUP TO SUPPORT THE HOURS BILLED ON THE PROJECT.**

[illegible]

## EXAMPLE – RECEIPT / MILEAGE LOG

**THE LPA/CONSULTANT MUST PROVIDE ALL SUPPORTING DOCUMENTATION FOR DIRECT COSTS BILLED TO THE PROJECT.**

## ***SAMPLE RECEIPT***

555 S Anystreet  
Austin, TX 78745  
555-555-5555

STORE: 0003      REGISTER: 001  
CASHIER: KATIE  
ASSOCIATE: 0000000

CUSTOMER RECEIPT COPY

## ORIGINAL TRANSACTION INFORMATION

STORE : 00032  
REGISTER : 001  
DATE : 12/31/2005  
NUMBER : 5194

259.99

SUBTOTAL	259.99
SALES TAX	21.45
TOTAL	281.44

AMOUNT TENDERED	
Visa	281.44

ACCT: \*\*\*\*\*1234

EXP: 000000

APPROVAL: \$\$\$\$\$\$

CARDHOLDER: JANE SMITH

TOTAL PAYMENT	281.44
---------------	--------

Transaction: 52858 1/8/2006 2:40 PM

CARHOLDER SIGNATURE:

Jane Smith

THANK YOU FOR SHOPPING WITH US  
WE APPRECIATE YOUR BUSINESS

### Vehicle Mileage Log

Beginning Date:

[illegible]

Total Miles

# EXAMPLE - CHECK

PROVIDE A COPY OF THE CHECK MADE PAYABLE TO THE CONSULTANT.

1936

DATE

PAY TO THE ORDER OF

\$

CHECK NO.

1000

⑆000000166⑆ 000000529⑆ 1000

# CHECKLIST

- ☐ Package includes (1) complete copy of all documentation;
- ☐ Original signed CSU-001;
- ☐ CSU-001 formulas and codes have not been altered;
- ☐ Original current Consultant invoice;
- ☐ All supporting documentation for payment of the invoice (i.e. billing back up, timesheets, hotel receipts, mileage logs, and all other information indicated in the Contract);
- ☐ Proof of payment;
- ☐ Subconsultant(s) Invoice (Providing the same information and in the same format as the prime consultant); and
- ☐ The hours or services billed are on or after the Notice to Proceed date.

**C. CONSTRUCTION ENGINEERING &  
INSPECTION INVOICING PACKAGE**

# INSTRUCTIONS

- I. MDOT creates LPA-001 and e-mails it to the LPA/Consultant after NTP and executed Contract is received by MDOT;
- II. Consultant's project manager signs CSU-001 and forwards a complete copy of the Invoice Package to the LPA;
- III. LPA Reviews Invoice Package, if appropriate, Chief Administrative Official (CAO) signs LPA-001;
- IV. LPA pays the Consultant prior to MDOT reimbursement;
- V. LPA submits to MDOT "LPA Invoice Package" digitally at [lpainvoice@mdot.ms.gov](mailto:lpainvoice@mdot.ms.gov);
- VI. MDOT reviews billing, if appropriate, processes invoice; and
- VII. MDOT CSU will sign and send copy of the invoice to the LPA.

# EXAMPLE – LPA-001

THIS CSU-001 FORM IS AN EXCEL SPREADSHEET WITH PERTINENT FINANCIAL CODING AND IS PROJECT SPECIFIC.

<u>ENGINEERING LPA-001 For LPA's</u>									
MISSISSIPPI DEPARTMENT OF TRANSPORTATION CONSTRUCTION <u>ENGINEERING</u> ESTIMATE - RECAP SHEET									
Vendor Number								P.O. No. 3941	
Project No.					County			Invoice Number :	
In Account With								Sheet No.	1 of
Contract Number:					Surety				
Est. No.					Period			THRU	
				(Progress Estimate Final)			Document No.		

	Line Item	OCA	User Code 1	Object	Project Number / Detail Code	User Code 2	Current Period	Previous Estimate	Total Allowed to Date
Total Participating Cost	001	080125	153	1612		1	0.00	0.00	0.00
Total							0.00	0.00	0.00
Retainage at 5.00%	004	080125	153	3530		1	0.00	0.00	0.00
Total All Work Due							0.00	0.00	0.00
Liquidated Damages	010	080125	153	3520		1	0.00		
Testing Charges	012	062090	734	6500		1			
<b>Total Net Work Due</b>							<b>0.00</b>	<b>0.00</b>	<b>0.00</b>

Quantities Checked Original Signed _____ <div style="text-align: center; margin-top: 10px;">Project Engineer</div>	Completion Date: _____	<b>AMOUNT OF PAYMENT FOR ALL PROGRESS AND FINAL ESTIMATES SHOULD BE PAID TO THE NEAREST CENTS (\$0.00)</b>	
LPA Official _____	Contract % Complete		
Approved By: _____	Contract % of Elapsed Time		
Consultant Services Unit Engineer - Scot Ehrgott, P.E.			

	Line Item	OCA	User Code 1	Object	Project Number / Detail Code	User Code 2	Current Period	Previous Estimate	Total Allowed to Date
% Matching Funds Deduction for LPA	001	080125	153	1612		2	0.00	0.00	0.00
<b>TOTAL Net Amount Owed to the LPA</b>							<b>0.00</b>	<b>0.00</b>	<b>0.00</b>

THE SOLE PURPOSE OF THE CONTRACT ADMINISTRATION ENGINEER'S SIGNATURE IS TO ACKNOWLEDGE THAT THE LPA HAS SUBMITTED THE CERTIFICATION AND OTHER DATA REQUIRED BY THE LPA MANUAL FOR PAYMENT



# EXAMPLE - INVOICE

THE INVOICE SHOULD BE FORMATTED IN ACCORDANCE WITH THE EXHIBIT 4 IN THE CONTRACT.

## EXHIBIT 4

### SAMPLE INVOICE [Labor-Hour/Unit Cost]

LPA's name  
LPA's address

DATE:

ATTENTION: LPA, Consultant Services Administrator

INVOICE NO. 0000

PERIOD \_\_\_\_ 20\_\_ THROUGH \_\_\_\_ 20\_\_

PROFESSIONAL SERVICES IN ACCORDANCE WITH

CONTRACT DATED \_\_\_\_ 20\_\_ AS RELATES TO

PROJECT NO. \_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_ IN \_\_\_\_ COUNTY, HIGHWAY \_\_\_\_.

CONSULTANT:

CUSTOMER NUMBER 0000000000

FILE NO. 000-000000

CURRENT PERIOD	PREVIOUS ESTIMATE	TOTAL ALLOWED TO DATE
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* LABOR COSTS	\$	\$	\$
---------------	----	----	----

** DIRECT COSTS	\$	\$	\$
-----------------	----	----	----

PROJECT TOTAL	\$	\$	\$
---------------	----	----	----

AMOUNT DUE THIS INVOICE: \$

NOTE:

1. \* ATTACH SUPPORTING DATA
2. \*\* DIRECT COSTS (ATTACH SUPPORTING DATA)
3. THE CONSULTANT MAY USE ITS OWN INVOICE FORM SO LONG AS IT HAS BEEN APPROVED. PRIOR TO SUBMISSION BY THE CONSULTANT SAID FORM SHOULD, AT A MINIMUM, CONTAIN THE ABOVE INFORMATION

## SUPPORTING DATA

Project No. 00-0000-00-000-00  
County \_\_\_\_\_

Employee and Classification	Rate of Pay (in contract)	Current Period Hours	Previous Period Costs	Costs To Date
--------------------------------	---------------------------------	----------------------------	-----------------------------	---------------------

### DIRECT LABOR AND DIRECT COSTS

John P. Public, Jr Engineer	0.00	0.00	0.00	0.00
--------------------------------	------	------	------	------

John P. Public, Jr Designer	0.00	0.00	0.00	0.00
--------------------------------	------	------	------	------

John P. Public, Jr Engineer	0.00	0.00	0.00	0.00
--------------------------------	------	------	------	------

John P. Public, Jr Technician	0.00	0.00	0.00	0.00
----------------------------------	------	------	------	------

Sub Total		0.00	0.00	0.00
-----------	--	------	------	------

Total Labor			0.00	0.00
-------------	--	--	------	------

Direct Costs			0.00	0.00
--------------	--	--	------	------

Project Total			0.00	0.00
---------------	--	--	------	------

# EXAMPLE – BILLING BACK-UP

THE LPA/CONSULTANT MUST PROVIDE TIMESHEETS AND/OR BILLING BACKUP TO SUPPORT THE HOURS BILLED ON THE PROJECT.

Project 99999.001

Invoice No. 102656

## Billing Backup

Tuesday, June 9, 2015

10:59:03 P.M.

ABC Engineering, Inc. Invoice No. 102656 Dated 6/9/2015

### Professional Personnel

		Hours	Rate	Amount
<b>Clerical</b>				
Jones, Jessica	5/18/2015	8.00	73.96	\$ 591.68
Jones, Jessica	5/19/2015	6.00	73.96	\$ 443.76
Jones, Jessica	5/20/2015	2.00	73.96	\$ 147.92
<b>Engineer</b>				
Butler, Mark	5/4/2015	6.00	133.58	\$ 801.48
Butler, Mark	5/5/2015	5.00	133.58	\$ 667.90
Butler, Mark	5/6/2015	4.00	133.58	\$ 534.32
Butler, Mark	5/7/2015	4.00	133.58	\$ 534.32
<b>Project Manager</b>				
Mays, David	5/4/2015	1.00	178.66	\$ 178.66
Mays, David	5/7/2015	1.00	178.66	\$ 178.66
<b>Engineer Intern</b>				
Littleton, Lisa	5/4/2015	6.00	77.84	\$ 467.04
Littleton, Lisa	5/5/2015	3.00	77.84	\$ 233.52
Littleton, Lisa	5/6/2015	5.00	77.84	\$ 389.20
Littleton, Lisa	5/7/2015	4.00	77.84	\$ 311.36
<b>Inspector</b>				
Stanford, David	5/4/2015	8.00	56.79	\$ 454.32
Stanford, David	5/5/2015	8.00	56.79	\$ 454.32
Stanford, David	5/6/2015	8.00	56.79	\$ 454.32
Stanford, David	5/7/2015	8.00	56.79	\$ 454.32
Stanford, David	5/8/15	8.00	56.79	\$ 454.32
Stanford, David	5/11/15	8.00	56.79	\$ 454.32
Stanford, David	5/12/15	8.00	56.79	\$ 454.32
Stanford, David	5/13/15	8.00	56.79	\$ 454.32
Stanford, David	5/14/15	8.00	56.79	\$ 454.32
Stanford, David	5/15/15	8.00	56.79	\$ 454.32
Stanford, David	5/18/15	8.00	56.79	\$ 454.32
Stanford, David	5/19/15	8.00	56.79	\$ 454.32

**Total Labor**

151.00

\$ 10,931.66

## EXAMPLE – TIMESHEET

**THE LPA/CONSULTANT MUST PROVIDE TIMESHEETS AND/OR BILLING BACKUP TO SUPPORT THE HOURS BILLED ON THE PROJECT.**

[illegible]

## EXAMPLE – RECEIPT / MILEAGE LOG

**THE LPA/CONSULTANT MUST PROVIDE ALL SUPPORTING DOCUMENTATION FOR DIRECT COSTS BILLED TO THE PROJECT.**

## ***SAMPLE RECEIPT***

555 S Anystreet  
Austin, TX 78745  
555-555-5555

STORE: 0003      REGISTER: 001  
CASHIER: KATIE  
ASSOCIATE: 0000000

CUSTOMER RECEIPT COPY

## ORIGINAL TRANSACTION INFORMATION

STORE : 00032  
REGISTER : 001  
DATE : 12/31/2005  
NUMBER : 5194

259.99

SUBTOTAL	259.99
SALES TAX	21.45
TOTAL	281.44

AMOUNT TENDERED	
U150	281.44

ACCT: \*\*\*\*\*1234

EXP: 000000

APPROVAL: \$\$\$\$\$\$

CARDHOLDER: JA

TOTAL PAYMENT

TOTAL PAYMENT	281.44
---------------	--------

Transaction: 52858 1/8/2006 2:40 PM

CARHOLDER SIGNATURE:

Jane Smith

THANK YOU FOR SHOPPING WITH US  
WE APPRECIATE YOUR BUSINESS

### Vehicle Mileage Log

Beginning Date:

[illegible]**Total Miles**

# EXAMPLE - CHECK

PROVIDE A COPY OF THE CHECK MADE PAYABLE TO THE CONSULTANT.

1936

DATE \_\_\_\_\_

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_

CHECK NO. \_\_\_\_\_

1000

⑆0000000166⑆ 000000529⑆ 1000

# CHECKLIST

- ☐ Package includes (1) complete copy of all documentation;
- ☐ Original signed LPA-001;
- ☐ LPA-001 formulas and codes have not been altered;
- ☐ Original current Consultant invoice;
- ☐ All supporting documentation for payment of the invoice (i.e. billing back up, timesheets, hotel receipts, mileage logs, and all other information indicated in the Contract);
- ☐ Proof of payment;
- ☐ Subconsultant(s) Invoice (Providing the same information and in the same format as the prime consultant);
- ☐ The hours or services billed are on or after the Notice to Proceed date; and
- ☐ Rates and Classifications match thru out the Contract.

## **D. FINAL INVOICING PACKAGE**

# INSTRUCTIONS

- I. Consultant's project manager signs CSU-001/LPA-001 marked "FINAL" and forwards a complete copy of the Invoice Package to the LPA;
- II. LPA Reviews "LPA FINAL Invoice Package", if appropriate, Chief Administrative Official (CAO) signs CSU-001/LPA-001;
- III. LPA pays the Consultant prior to MDOT reimbursement;
- IV. LPA submits to MDOT "LPA FINAL Invoice Package" digitally at [lpainvoice@mdot.ms.gov](mailto:lpainvoice@mdot.ms.gov);
- V. MDOT reviews billing, if appropriate, processes invoice; and
- VI. MDOT CSU will sign and send copy of the invoice to the LPA.



# EXAMPLE – CSU-001

THIS CSU-001 FORM IS AN EXCEL SPREADSHEET WITH PERTINENT FINANCIAL CODING AND IS PROJECT SPECIFIC.

<b>PRELIMINARY ENGINEERING CSU-001 For LPA's</b> <b>MISSISSIPPI DEPARTMENT OF TRANSPORTATION</b> <b>PRELIMINARY ENGINEERING ESTIMATE - RECAP SHEET</b>									
Vendor Number _____ Project No. _____ County _____ In Account With _____ Contract Number: _____ Est. No. _____ (Progress Estimate / Final) Period _____ THRU _____						P.O. No. 3941 Invoice Number: _____ Sheet No. 1 of _____ Document No. _____			
	Line Item	OCA	User Code 1	Object	Project Number / Detail Code	User Code 2	Current Period	Previous Estimate	Total Allowed to Date
Total Participating Cost	1					1			
Total								0.00	
Total All Work Due								0.00	
Total Net Work Due								0.00	
Invoice Submitted _____ Original Signed _____ Consultant - Project Manager LPA Official _____ MDOT Consultant Admin _____ Consultant Services Director, Scot Ehrgott						Current Termination Date of Contract: _____ (** No Work is reimbursable after the termination date has been exceeded**)		<b>AMOUNT OF PAYMENT FOR ALL ESTIMATES SHOULD BE TO THE NEAREST CENTS (\$0.00).</b>	
						Maximum Amount Allowed for Project (Total Net Work Due): _____			
1/2 Matching Funds Deduction for LPA 0.00000%	001		153	1612		1		0.00	
<b>TOTAL Net Amount Owed to the LPA</b>								<b>0.00</b>	
*** Please populate any fields which are notated by the shaded boxes: _____									

# EXAMPLE – FINAL INVOICE

THE INVOICE SHOULD BE FORMATTED IN ACCORDANCE WITH THE EXHIBIT 4 IN THE CONTRACT.

## EXHIBIT 4 SAMPLE INVOICE

**FINAL**

LOCAL PUBLIC AGENCY  
ADDRESS  
CITY, STATE, ZIP CODE

DATE:

ATTENTION: ACCOUNTS PAYABLE

INVOICE NO. 0000

PERIOD \_\_\_\_ 20\_\_ THROUGH \_\_\_\_ 20\_\_

PROFESSIONAL SERVICES IN ACCORDANCE WITH

CONTRACT DATED \_\_\_\_ 20\_\_ AS RELATES TO

PROJECT NO. \_\_\_\_ IN \_\_\_\_ COUNTY, HIGHWAY \_\_\_\_

CONSULTANT:

CUSTOMER NUMBER 0000000000 FILE NO. 000-000000

REPORT NUMBER: 0000 through 00000

	CURRENT PERIOD	PREVIOUS ESTIMATE	TOTAL ALLOWED TO DATE
DIRECT SALARIES	\$	\$	\$
* PAYROLL ADDITIVE (less FCCM)	\$	\$	\$
FIXED FEE (% complete X total fee less amounts previously paid - not to exceed 75%)	\$	\$	\$
PAYROLL ADDITIVE w/ FCCM only	\$	\$	\$
** DIRECT COSTS	\$	\$	\$
PROJECT TOTAL	\$	\$	\$
AMOUNT DUE THIS INVOICE:	\$	\$	\$

### NOTE:

1. \* PAYROLL ADDITIVES (INCLUDING ALL FRINGE BENEFITS & OVERHEAD-)
2. \*\* DIRECT COSTS (ATTACH SUPPORTING DATA)
3. THE CONSULTANT MAY USE ITS OWN INVOICE FORM SO LONG AS IT HAS BEEN APPROVED. PRIOR TO SUBMISSION BY THE CONSULTANT SAID FORM SHOULD, AT A MINIMUM, CONTAIN THE ABOVE INFORMATION

## SUPPORTING DATA

**FINAL**

Project No. 00-0000-00-000-00  
County \_\_\_\_\_

Employee and Classification	Rate of Pay	Current Period Hours	Current Period Costs	Previous Period Costs	Costs To Date
DIRECT LABOR AND DIRECT COSTS					
John P. Public, Jr Engineer	0.00	0.0	0.00	0.00	0.00
John P. Public, Jr Designer	0.00	0.0	0.00	0.00	0.00
John P. Public, Jr Engineer	0.00	0.0	0.00	0.00	0.00
John P. Public, Jr Technician	0.00	0.0	0.00	0.00	0.00
Sub Total		0.0	0.00	0.00	0.00
Payroll Additives (minus FCCM)			0.00	0.00	0.00
Total Labor			0.00	0.00	0.00
Fixed Fee			0.00	0.00	0.00
Payroll additives w/ only FCCM (Direct Labor * FCCM)			0.00	0.00	0.00
Direct Costs			0.00	0.00	0.00
Project Total			0.00	0.00	0.00

# CHECKLIST

- ☐ Package includes (1) complete copy of all documentation;
- ☐ Original signed CSU-001/LPA-001;
- ☐ CSU-001/LPA-001 formulas and codes have not been altered;
- ☐ Original current Consultant invoice;
- ☐ All supporting documentation for payment of the invoice (i.e. billing back up, timesheets, hotel receipts, mileage logs, and all other information indicated in the Contract);
- ☐ Proof of payment;
- ☐ Subconsultant(s) Invoice (Providing the same information and in the same format as the prime consultant);
- ☐ The hours or services billed are on or after the Notice to Proceed date; and
- ☐ The word “FINAL” is indicated on the Consultant invoice and CSU-001/LPA-001.